

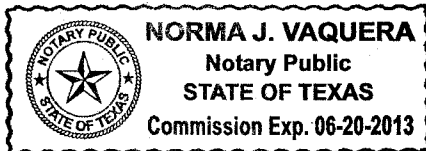
**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.						1 ACCOUNT # (Ethics Commission filers) 00000001		2 PAGE # 1 of 15	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR FIRST MI Mr. Amadeo				OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged			
		NICKNAME LAST SUFFIX Ortiz							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 330 East Crestline San Antonio, TX 78201							
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mrs. Belinda							
		NICKNAME LAST SUFFIX Dovalina							
6 CAMPAIGN TREASURER ADDRESS (Residence or business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9311 Moonlit Glade Helotes, TX 78023							
7 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION							
8 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)							
9 PERIOD COVERED		Month Day Year THROUGH Month Day Year 07/01/2010 12/31/2010							
10 ELECTION		ELECTION DATE Month Day Year				ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE		OFFICE HELD (if any) Bexar County Sheriff				12 OFFICE SOUGHT (if known)			
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages		.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. .. Name Address/PO Box; Apt. / Suite #; City; State; Zip Code							

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME** Ortiz, Amadeo (Mr.)**15 ACCOUNT #** (Ethics Commission filers)
00000001**16 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION
TOTALS**1. **TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED****\$** 0.002. **TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)****\$** 10,355.00**EXPENDITURE
TOTALS**3. **TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED****\$** 0.004. **TOTAL POLITICAL EXPENDITURES****\$** 6,938.87**CONTRIBUTION
BALANCE**5. **TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD****\$** 19,938.23**OUTSTANDING
LOAN TOTALS**6. **TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD****\$** 0.00**18 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Amadeo Ortiz
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

Amadeo Ortiz
Norma J. Vaquera

this the 11 dayof January, 20 11, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/8 Report: 3/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alvidrez, Mark (Mr.) 6 Contributor address; City; State; Zip Code 4700 Capital of Texas Hwy #224 Austin, TX 78746	7 Amount of contribution (\$) \$70.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) American Roofing Company Contributor address; City; State; Zip Code 11311 Sir Winston #403 San Antonio, TX 78216	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Apolinar, Roger (Mr.) Contributor address; City; State; Zip Code 21936 Park View Drive Garden Ridge, TX 78266	Amount of contribution (\$) \$70.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benson, Larry (Mr.) Contributor address; City; State; Zip Code 7551 Callaghan Road, Suite 300 San Antonio, TX 78229	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bignola, Serena (Ms.) Contributor address; City; State; Zip Code 10264 Korona Drive Mechanicsville, VA 23116	Amount of contribution (\$) \$600.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/8 Report: 4/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cavazos, Sylvia (Ms.) 6 Contributor address; City; State; Zip Code 1919 San Pedro Avenue San Antonio, TX 78212	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christenberry, James (Mr.) Contributor address; City; State; Zip Code 1700 N. Panam Expressway San Antonio, TX 78208	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Correa, Edward (Mr.) Contributor address; City; State; Zip Code 1930 West Summit San Antonio, TX 78201	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Correa, Joe (Mr.) Contributor address; City; State; Zip Code 26920 Kentoaks Drive San Antonio, TX 78260	Amount of contribution (\$) \$120.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deputy Sheriff's Association of Bexar County/PAC Contributor address; City; State; Zip Code 816 Camaron Street, Suite 214 San Antonio, TX 78212	Amount of contribution (\$) \$600.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/8 Report: 5/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dovalina, Roger (Mr.) 6 Contributor address; City; State; Zip Code 9311 Moonlit Glade Helotes, TX 78023	7 Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernandez, Raul (Mr.) Contributor address; City; State; Zip Code 9607 Summer Vail San Antonio, TX 78251	Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferruzzi, Gloria (Ms.) Contributor address; City; State; Zip Code 10106 Circle C Trail Helotes, TX 78023	Amount of contribution (\$) \$70.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fletcher, Roy (Mr.) Contributor address; City; State; Zip Code 11893 Braisview San Antonio, TX 78213	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabehart, Daniel (Mr.) Contributor address; City; State; Zip Code 306 Bloomfield Drive San Antonio, TX 78228	Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/8 Report: 6/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabehart, Daniel (Mr.) 6 Contributor address; City; State; Zip Code 306 Bloomfield Drive San Antonio, TX 78228	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Paul (Mr.) Contributor address; City; State; Zip Code 3610 Hunters Dove San Antonio, TX 78230	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Roberto (Mr.) Contributor address; City; State; Zip Code 1747 Fawn Gate San Antonio, TX 78248	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hayes, Homer III (Mr.) Contributor address; City; State; Zip Code 4901 Kinsey Drive Apt 21224 Tyler, TX 75703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henderson, Tyra (Ms.) Contributor address; City; State; Zip Code 9434 Fulwood Trail San Antonio, TX 78239	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/8 Report: 7/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huber, Jennifer (Ms.) 6 Contributor address; City; State; Zip Code 26151 Meadowlark Bay San Antonio, TX 78260	7 Amount of contribution (\$) \$70.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jordan, Debra (Mrs.) Contributor address; City; State; Zip Code 171 Red Oak Court Seguin, TX 78155	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/03/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Juarez, Gilbert (Mr.) Contributor address; City; State; Zip Code 7423 Rocky Cedar San Antonio, TX 78249	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Longoria, Manuel (Mr.) Contributor address; City; State; Zip Code 31035 Retama Ridge Bulverde, TX 78163	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Diana (Ms.) Contributor address; City; State; Zip Code 318 Stimmel Street San Antonio, TX 78227	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/8 Report: 8/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Elizabeth (Ms.) 6 Contributor address; City; State; Zip Code 2122 La Manda Blvd San Antonio, TX 78261	7 Amount of contribution (\$) \$140.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCombs, B. J. Contributor address; City; State; Zip Code P O Box BH003 San Antonio, TX 78201	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Minarich, Madonna (Ms.) Contributor address; City; State; Zip Code 12123 Orchid Blossom Street San Antonio, TX 78247	Amount of contribution (\$) \$70.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ortiz, Epigmenia (Ms.) Contributor address; City; State; Zip Code 802 King Avenue San Antonio, TX 78211	Amount of contribution (\$) \$585.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ortiz, Lorenzo Amador (Mr.) Contributor address; City; State; Zip Code 3 Greens Whisper San Antonio, TX 78216	Amount of contribution (\$) \$70.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8 Report: 9/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ortiz, Richard (Mr.) 6 Contributor address; City; State; Zip Code 16441 FM 2790 South Lytle, TX 78052	7 Amount of contribution (\$) \$105.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez, Charles (Mr.) Contributor address; City; State; Zip Code 27010 Trill Hill San Antonio, TX 78260	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez, Victor (Mr.) Contributor address; City; State; Zip Code 2903 East Ramblewood San Antonio, TX 78261	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Anita (Ms.) Contributor address; City; State; Zip Code 16441 FM 2790 South Lytle, TX 78052	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Martha (Mrs.) Contributor address; City; State; Zip Code 11318 Whisper Dawn San Antonio, TX 78230	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/8 Report: 10/15	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 12/17/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Rose Mary (Ms.) 6 Contributor address; City; State; Zip Code 4903 East Beverly Mae Drive San Antonio, TX 78229	7 Amount of contribution (\$) \$70.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Richard (Mr.) Contributor address; City; State; Zip Code 11811 10 East Suite 630 Houston, TX 77229	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tomasini, Linda (Ms.) Contributor address; City; State; Zip Code 539 Thompson Place San Antonio, TX 78225	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valle, James (Mr.) Contributor address; City; State; Zip Code 2023 Buffalo Street San Antonio, TX 78211	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/17/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zook, Donald (Mr.) Contributor address; City; State; Zip Code 2439 West Summit Avenue San Antonio, TX 78228	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/5 Report: 11/15		2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 12/10/2010		5 Payee name Arbolitos Nursery			
6 Amount (\$) \$35.00		7 Payee address City; State; Zip Code 6714 South Flores San Antonio, TX 78212			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Plants to decorate hall for Christmas concert	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/12/2010		Payee name Birt, Tim (Mr.)			
Amount (\$) \$700.00		Payee address City; State; Zip Code 11410 Winters Edge San Antonio, TX 78253			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Performance at Christmas Concert	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/12/2010		Payee name Braswell, Donald (Mr.)			
Amount (\$) \$700.00		Payee address City; State; Zip Code 106 Kendall Woods Drive Boerne, TX 78006			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Performance at Christmas Concert	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/12/2010		Payee name Chapman, William (Mr.)			
Amount (\$) \$700.00		Payee address City; State; Zip Code 1107 Dwyerbrook San Antonio, TX 78253			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Performance at Christmas Concert	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/5 Report: 12/15

2 FILER NAME
Ortiz, Amadeo (Mr.)

3 ACCOUNT # (TEC filers)
00000001

4 Date
07/29/2010

5 Payee name
Hispanic American Police Command Officers Association

6 Amount (\$)
\$240.00

7 Payee address City; State; Zip Code
P O Box 831544
San Antonio, TX 78283

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

(b) Description (If travel outside of Texas, complete Schedule T) ☐
Tickets to Comedy Show-Table of Eight

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

Date
12/12/2010

Payee name
Horwath, Alan (Mr.)

Amount (\$)
\$400.00

Payee address City; State; Zip Code
6146 Spring Time Street
San Antonio, TX 78249

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Event Expense

Description (If travel outside of Texas, complete Schedule T) ☐
Sound & Lighting for Christmas Concert

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

Date
10/19/2010

Payee name
Jam Designs

Amount (\$)
\$64.88

Payee address City; State; Zip Code
1890 South Brazos
San Antonio, TX 78207

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Advertising Expense

Description (If travel outside of Texas, complete Schedule T) ☐
Removal Vinyl Signs with Bexar County Badge Logos

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

Date
07/15/2010

Payee name
Jim's Restaurant

Amount (\$)
\$54.35

Payee address City; State; Zip Code
351 Hildebrand
San Antonio, TX 78212

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Food/Beverage Expense

Description (If travel outside of Texas, complete Schedule T) ☐
Golf Tournament Committee Meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/5 Report: 13/15		2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 10/25/2010		5 Payee name KARMA			
6 Amount (\$) \$350.00		7 Payee address City; State; Zip Code 8123 Broadway San Antonio, TX 78209			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Table of 8 for a Non Profit Organization Fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 12/17/2010		Payee name Luciano's River			
Amount (\$) \$2,100.00		Payee address City; State; Zip Code 849 East Commerce #183 San Antonio, TX 78205			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Catered Food for Christmas Concert	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 10/08/2010		Payee name San Antonio Park Police Organization			
Amount (\$) \$150.00		Payee address City; State; Zip Code P O Box 15442 San Antonio, TX 78212			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Purchased Hole Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 11/22/2010		Payee name St. Luke's Catholic Church			
Amount (\$) \$1,000.00		Payee address City; State; Zip Code 4603 Monitou San Antonio, TX 78228			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Hall Rental Fee - Christmas Concert	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 4/5 Report: 14/15		2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 12/12/2010		5 Payee name St. Luke's Catholic Church			
6 Amount (\$) \$200.00		7 Payee address City; State; Zip Code 4603 Monitou San Antonio, TX 78228			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Beer & Wine for Christmas Concert	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/11/2010		Payee name Tommy's Restaurant			
Amount (\$) \$47.64		Payee address City; State; Zip Code 1205 Nogalitos San Antonio, TX 78204			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Community Clean-up Volunteers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/29/2010		Payee name U S Postal Service			
Amount (\$) \$132.00		Payee address City; State; Zip Code Arsenal Station San Antonio, TX 78204			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/27/2010		Payee name Veteran's Parade Association			
Amount (\$) \$20.00		Payee address City; State; Zip Code P O Box 781353 San Antonio, TX 78278			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parade Entry Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/5 Report: 15/15		2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 10/22/2010		5 Payee name Wings Over Texas			
6 Amount (\$) \$45.00		7 Payee address City; State; Zip Code 835 East Lamar Blvd #344 Arlington, TX 76011			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Magazine	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held: